

## Water Resources Program Application for a Water Right Permit



DEPARTMENT OF ECOLOGY EASTERN REGIONAL OFFICE

	RFACE WATER GROUND WATER PERM	EASTERN REGIONAL OFFICE MANENT
☐ TEMPORARY ☐ SHORT TERM ☐ DROUGHT	☐ TEMPORARY ☐ SHORT TERM ☐ DROUG	нт

Section 1. APPLICANT			
Jedion I. ALL DICALL			
Applicant/Business Name: Samis Fou	ndation	Phone No: 206-622-3363	Other No:
Address: 208 James Street, Suite C			
City: Seattle,		State: WA	Zip:98104
Email Address (optional):			
Contact Name (if different from abov	Phone No: 509-750-2100	Other No: 509-754-3511	
Relationship to Applicant: Agent		309-730-2100	309-734-3311
Address: 14 Basin St SW			
City: Ephrata		State: WA	Zip: 98823
Email Address (optional): jpatrick@n	wi.net		- V
Legal Land Owner or Part Owner Na Samis Foundation	Phone No: 206-622-3363	Other No:	
Address: 208 James Street, Suite C			
City: Seattle	State: WA	Zip:98104	
Email Address (optional):			
Section 2. STATEMENT	OF INTENT		
Briefly describe the purpose of you	ar proposed project: For irrigatio	n of 520 Acres	
Anticipated length of time to comp	lete your project: 6 months		
Water Use List all purposes for w	hich water will be applied to a b	eneficial use and list o	uantity required for each
Purpose(s) of Use	Rate (check one box only)  Cubic Feet per Second (CFS)  Gallons per Minute (GPM)	1	eriod of Use Continuously or Seasonal
Irrigation	5200		-15- to 10-01, Seasona
	5200	114	
TOTAL:			

For Ecology Use	APPLICATION NO:_	63-30616	SEPA: Exempt/Not Exempt
	\$50,0	28702	
	Fee Paid:	Check No:	ECY Coding: 001-001-WR1-0285-000011

Short Ter	m/Temporary	Water 1	U <b>se</b>					
Is this a re-	quest for a shor	t term pi	roject (le	ess than for	ur months an	d non-recurr	ring)?	YES 🗹 NO
Is this requ	est for a tempo	rary per	mit?	YES V	10			
If yes to ei	ther question a	bove, inc	licate th	e dates tha	t the water w	ill be needed	d:	
FROM: _		TO:						
M 9.17 7 15 15 15	3. POINT			SION C	OR WITH	DRAWA	L	
	ırface Water				B.)	If Ground	Water S	Source
	g Creek C					Well(s)	Other:	
	Name:					diameter &	denth:16	5" to 400'
					Niver			ts of withdrawal:1
Tributary	to:							well? YES NO
the state of the state of	of proposed div	_	The state of the s		If av	ailable, attac	ch Water	Well Report and pump test.
	nt of Diversion				11101	Tag ID No.		
	arcel No.	1/4	1/4	Section	Township	Range		County
	1846-000	74	74	6	22	27		Grant
	Lot(s)		Block(	(s)	S	ubdivision		
If known	enter the dista	nces in 1	eet from	the point	of diversion	or withdraw	ral to the	nearest section corner:
<u>2600</u> F	eet (□ North/[ (☑NW □SW	<b>√</b> South	) and <u>26</u>	600fee	t (East/	] West)		
Pa	arcel No.	1/4	1/4	Section	Township	Range		County
Lot(s) Block(s) Subdivision								
If known	If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:							
fee	et ( North/	South)	and	feet (	East/\ We	st)		
NOTE: If n	nore than two po	ints of div	ersion/w	ithdrawal a	ttach addition	al informatio	n on a sep	parate sheet of paper.
Do you ov If no, do y		which the	e propos to make	ed point of this applic	f diversion/w cation for use	rithdrawal is e of another'	located?	✓ YES □ NO
Section	14. PLAC	E OF I	JSE					
Attach a	copy of the leg	al descr	ption o					used) taken from a real
	tract, propert						ny in the	space below.
THE WAY			- 12-11				trata ii	
1/4			Гwp.	Range	Cwart	County		Parcel No.
1	6	22		27	Grant ————			See Attached
For Ecology	ADDITION TO THE PROPERTY OF TH	NO:						SEPA: Exempt/Not Exempt
Use	APPLICATION	140		l. N.			/ Cc !!	
	Fee Paid:	110	Chec	k No:		ECY	coding: 00	01-001-WR1-0285-000011
	WRIA	42						

## Additional Tax Parcel Numbers for Section 6, Township 22, Range 27

16-1845-000

16-1846-000 \*\*\* On application as withdrawal point.

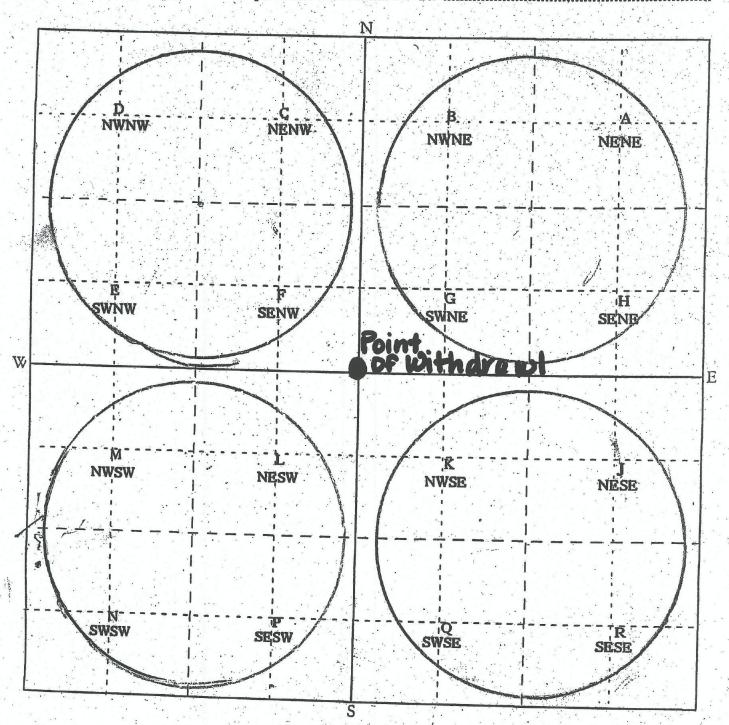
16-1847-000

16-1848-001

16-1849-001

## USGS METHOD OF INDICATING WELL LOCATIONS

Sec. 6 Twp. 22 N. R. 27 EWM



Scale: 1 inch = 800 feet (each small square = 10 acres)

Show by a cross (X) the location of point of diversion (surface water source) or point of withdrawal (ground water source): For Indicate traveling directions from nearest town in space below.

	ation for use of another's land? YES NO
[10] [10] [10] [10] [10] [10] [10] [10]	with this property or water system? YES NO
yes, provide the water right and/or olaim numbers	
ttach a map of your project showing the point of e sure to include a complete copy of the plat map	diversion/withdrawal and place of use. If platted propert
ection 5. WATER SYSTEM DESCRI	PTION
	nd size of devices used to divert or withdraw water from  Circle Irrigation on all quarters
Section 6. DOMESTIC WATER SUP (Complete A or B, and C below)	PLY SYSTEM INFORMATION
	B.) Municipal Water Systems only (defined under RCW 90.03.015)
(Complete A <u>or</u> B, and C below)	B.) Municipal Water Systems only
(Complete A <u>or</u> B, and C below)  A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
(Complete A or B, and C below)  A.) Domestic Water Systems only  Projected number of connections to be served:	B.) Municipal Water Systems only (defined under RCW 90.03.015)  Present population to be served water:  Estimate future population to be served:
(Complete A or B, and C below)  A.) Domestic Water Systems only  Projected number of connections to be served:  Type of connections:  (e.g., home, recreational cabin)  C.) Water System Planning	B.) Municipal Water Systems only (defined under RCW 90.03.015)  Present population to be served water:  Estimate future population to be served:
(Complete A or B, and C below)  A.) Domestic Water Systems only  Projected number of connections to be served:  Type of connections:  (e.g., home, recreational cabin)  C.) Water System Planning  Do you have a Water System Plan approved by the Division?  YES  NO  If yes, date plan was approved/	B.) Municipal Water Systems only (defined under RCW 90.03.015)  Present population to be served water:   Estimate future population to be served:(20 year projection)  Washington State Department of Health, Drinking Water  Water System Number:
(Complete A or B, and C below)  A.) Domestic Water Systems only  Projected number of connections to be served:  Type of connections:  (e.g., home, recreational cabin)  C.) Water System Planning  Do you have a Water System Plan approved by the Division?  YES  NO  If yes, date plan was approved//  Name of water system:/	B.) Municipal Water Systems only (defined under RCW 90.03.015)  Present population to be served water:  Estimate future population to be served:(20 year projection)  Washington State Department of Health, Drinking Water  Water System Number:
(Complete A or B, and C below)  A.) Domestic Water Systems only  Projected number of connections to be served:  Type of connections:  (e.g., home, recreational cabin)  C.) Water System Planning  Do you have a Water System Plan approved by the Division?   YES   NO  If yes, date plan was approved//  Name of water system:  Are you within the service area of an existing water	B.) Municipal Water Systems only (defined under RCW 90.03.015)  Present population to be served water:  Estimate future population to be served:(20 year projection)  Washington State Department of Health, Drinking Water  Water System Number:
(Complete A or B, and C below)  A.) Domestic Water Systems only  Projected number of connections to be served:  Type of connections:  (e.g., home, recreational cabin)  C.) Water System Planning  Do you have a Water System Plan approved by the Division?   YES   NO  If yes, date plan was approved//  Name of water system:  Are you within the service area of an existing water	B.) Municipal Water Systems only (defined under RCW 90.03.015)  Present population to be served water:   Estimate future population to be served:(20 year projection)  Washington State Department of Health, Drinking Water  Water System Number:  r system?
A.) Domestic Water Systems only  Projected number of connections to be served:  Type of connections:  (e.g., home, recreational cabin)  C.) Water System Planning  Do you have a Water System Plan approved by the Division?  YES NO  If yes, date plan was approved/	B.) Municipal Water Systems only (defined under RCW 90.03.015)  Present population to be served water:
(Complete A or B, and C below)  A.) Domestic Water Systems only  Projected number of connections to be served:  Type of connections:  (e.g., home, recreational cabin)  C.) Water System Planning  Do you have a Water System Plan approved by the Division?   YES   NO  If yes, date plan was approved//  Name of water system:  Are you within the service area of an existing water	B.) Municipal Water Systems only (defined under RCW 90.03.015)  Present population to be served water:
A.) Domestic Water Systems only  Projected number of connections to be served:  Type of connections:  (e.g., home, recreational cabin)  C.) Water System Planning  Do you have a Water System Plan approved by the Division?  YES NO  If yes, date plan was approved/	B.) Municipal Water Systems only (defined under RCW 90.03.015)  Present population to be served water:

ACRES

Total number of acres requested to be irrigated under this application = 520

NOTE: Outline the area to be irrigated on your attached map.

Stockwater	
ist number and kind of stock:	<u> </u>
s the proposed project for a dairy farm?  YES NO	
D4F or Draw and Form Hoo	
Other Proposed Farm Uses Describe all proposed uses:	
Family Farm Water Act (RCW 90.66):	
Calculate the acreage in which you have a controlling interest, including only:	
<ul> <li>Acreage irrigated under water rights acquired after December 8, 1977,</li> </ul>	
Acreage proposed to be irrigated under this application, and	
<ul> <li>Acreage proposed to be irrigated under other pending application(s).</li> </ul>	
s the combined acreage under existing rights greater than 6000 acres?  YES	NO
Do you have a controlling interest in a Family Farm Development Permit? TYE	SIVNO
If yes, enter Permit No:	S LV NO
If yes, enter Permit No:	
Section 8. OTHER WATER USES	
Hydropower .	
Indicate total feet of head and proposed capacity in kilowatts:	
Describe works:	
T 1' / 11 / 4 which record is to be smalled.	
Indicate all uses to which power is to be applied:	
FERC License No:	
Mining/Industrial Use	
Describe use, method of supplying and utilizing water:	
Other Use	
Section 0 WATER STORAGE	
Section 5. WATER STORAGE	
Will you be using a dam, dike, or other structure to retain or store water? YES	NO NO
Are you proposing to store more than 10 acre-feet of water? TYES WNO	
그 아내는 하는 그 그래요 이 그렇게 돼 뭐라면 그리고 하는데 하게 그렇게 되는 것을 보고 하는데 다른데	150' by 250'
11 you anoward you to any of the above questions, prouse describe. Holding bolld,	150 0, 250
NOTE TO 111 and 10 Control 11 Con	10.0
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will to and some portion of the storage will be above grade, you must also complete an Applicati	
Section 9. WATER STORAGE  Will you be using a dam, dike, or other structure to retain or store water? YES Are you proposing to store more than 10 acre-feet of water? YES NO Will the water depth be 10 feet or more? YES NO f you answered yes to any of the above questions, please describe: Holding pond.  WOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be	in the section of the deepest points.

ECY 040-1-14 (Rev. 1-6-10) If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

Section 10. DRIVING DI	RECTIONS		
Provide detailed driving directions to Southeast corner of property	o the project site: From SR28 and Road A	NE, Go North 3 Miles on Road A NE	
Site Address:None			
Section 11. REQUIRED	SIGNATURES	*	
understand that in order to proce the site for inspection and monito	Signature  Eddir I Hansignature	Department of Ecology access to ees of the Department of Ecology onsibility for the accuracy of the  2-9-10  Date	
Print Name (Legal Owner or Part Owner Place	Signature of Use)	Date	
Print Name (Legal Owner or Part Owner Place	Signature of Use)	Date	
	Please check the region in	which the project is located:	
*Submit your application to:  DEPARTMENT OF ECOLOGY  CASHIERING SECTION  PO BOX 47611	Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400	
OLYMPIA, WA 98504-7611	Northwest Regional Office 3190 – 160 <sup>th</sup> Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300	

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



ECY 040-1-14 (Rev. 1-1 Persons with hear